## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

| CLAIMS AS FILED - PART I   |  |   |                                |                               |              |                  |        | SMALL ENTITY        |                        |           | OTHER THAN          |                        |
|--|--|---|--------------------------------|-------------------------------|--------------|------------------|--------|---------------------|------------------------|-----------|---------------------|------------------------|
| TOTAL CLAIMS   |  |   | (Column 1)                     |                               | (Column 2)   |                  | 7      | TYPE                |                        | OR        | SMALL               | ENTITY                 |
|  |  |   | 36                             |                               |              |                  |        | RATE                | FEE                    |           | RATE                | FEE                    |
| FOR  |  |   | NUMBER FILED                   |                               | NUMBER EXTRA |                  |        | BASIC FEE           | 355.00                 | OR        | BASIC FEE           | 710.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |   | 36 minus 20=                   |                               | 16           |                  |        | X\$ 9=              | 144.50                 | OR        | X\$18=              |                        |
| INDEPENDENT CLAIMS   |  |   | 7 minus 3 =                    |                               | 4            |                  |        | X40=                | 160.00                 | OR        | X80=                |                        |
| MU   | LTIPLE DEPEN   | DENT CLAIM P                              | RESENT                         |                               |              |                  |        | +135=               |                        | OR        | +270=               |                        |
| * If   | the difference   | in column 1 is                            | less than zero, enter "0" in c |                               |              | olumn 2          | L      | TOTAL               | 65900                  | OR        | TOTAL               |                        |
|  | . <b>C</b>   | LAIMS AS A<br>(Column 1)                  | <b>T   </b><br>mn 2)           | (Column 3)                    |              | SMALL E          | ENTITY | or                  | OTHER<br>SMALL         |           |                     |                        |
|  |  | CLAIMS                                    | 7 4. 7                         | HIGH                          |              | (Coldinii 3)     | Г      |                     |                        | )<br>!    |                     |                        |
| AMENDMENT A  |  | REMAINING<br>AFTER<br>AMENDMENT           |                                | NUM<br>PREVIO<br>PAID         | OUSLY        | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |           | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                          | **                            |              | =                |        | X\$ 9=              |                        | OR        | X\$18=              |                        |
|  | Independent  | *   | Minus                          | ***                           | F O1 444     | =                |        | X40=                |                        | OR        | X80=                |                        |
| L  | FIRST PRESE  | NTATION OF M                              | ULTIPLE DEF                    | 'ENDEN                        | CLAIM        |                  | Ī      | +135=               |                        | OR        | +270=               |                        |
|  |  |   |                                |                               |              |                  | L      | TOTAL               |                        | OR        | TOTAL               |                        |
|  |  | (Column 1)                                |                                | (Colui                        | mn 2\        | (Column 3)       | P      | ADDIT. FEE          | <u>.</u>               | i - ' ' . | ADDIT. FEE          | <del></del>            |
| _  |  | CLAIMS                                    |                                | HIGH                          | IEST         |                  | Г      |                     | ADDI-                  |           |                     | ADDI-                  |
| AMENDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT           |                                | NUM<br>PREVIO<br>PAID         | OUSLY        | PRESENT<br>EXTRA |        | RATE                | TIONAL<br>FEE          |           | RATE                | TIONAL<br>FEE          |
|  | Total  | *   | Minus                          | **                            |              | =                |        | X\$ 9=              |                        | OR        | X\$18=              |                        |
| AME  | Independent  | *   | Minus                          | ***                           |              | =                | İ      | X40=                |                        | OR        | X80=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                                |                               |              |                  | t      | .105                |                        |           | .070                |                        |
|  |  |   |                                |                               |              |                  |        | +135=               |                        | OR        | +270=               |                        |
|  |  |   |                                |                               |              |                  |        | TOTAL<br>ADDIT. FEE |                        | OR        | TOTAL<br>ADDIT. FEE |                        |
|  | Transfer of the Control of the Contr | (Column 1)                                | Tanggapaga acateenso a         | (Colu                         |              | (Column 3)       |        |                     |                        |           |                     |                        |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |           | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                          | **                            |              | =                |        | X\$ 9=              |                        | OR-       | . X\$18=            |                        |
|  | Independent  | ndent                                     |                                |                               | <b>.</b>     | =                | t      | X40=                |                        | OR        | X80=                |                        |
| <u> </u>   | FIRST PRESE  | NIAHON OF M                               | ULTIPLE DEF                    | 'ENDEN                        | CLAIM        |                  | -      | 105                 |                        |           | 070                 | ,                      |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |   |                                |                               |              |                  |        | +135=               |                        | OR        | +270=               |                        |
| "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  TOTAL ADDIT. FEE ADDIT. FEE  ADDIT. FEE |  |   |                                |                               |              |                  |        |                     |                        |           |                     |                        |
|  | The "Highest Num   | nber Previously Pa                        | id For" (Total or              | Independ                      | ent) is the  | highest number   | fou    | nd in the app       | ropriate box           | in co     | lumn 1.             |                        |